# FORM D

SEC Mail Mail Processing Section

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DEC 3 0 2008

SECURITIES AND EXCHANGE COMMISSION
OO Washington, D.C. 20549

TEMPORARY

Washington, DC

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

		 1	_

OMB APPROVAL

OMB Number: 3235-0076

Expires: December 31, 2008

Estimated average burden hours per response......4.00

Name of Offering ( check if this is an amendment and name has changed, and indicate change.) P2 Capital Fund II, L.P. © Section 4(6) D ULOE D Rule 504 D Rule 505 ■ Rule 506 Filing Under (Check box(es) that apply): Type of Filing: 

New Filing ■Amendment A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Name of Issuer (I) check if this is an amendment and name has changed, and indicate change.) P2 Capital Fund II, L.P. (the "Fund") Telephone Number (Including Area Code) Address of Executive Offices (Number and Street, City, State, Zip Code) 212-508-5500 c/o P2 Capital Partners, LLC, 590 Madison Avenue, 25th floor, New York, NY 10022 Telephone Number (Including Area Code) Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Brief Description of Business Investments. Type of Business Organization ■ limited partnership, already formed Other (please specify): D corporation D business trust [] limited partnership, to be formed Month Year ■ Actual □ Estimated Actual or Estimated Date of Incorporation or Organization: 0 0 8 1 Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: D Ε

### GENERAL INSTRUCTIONS

Note: This is a special Temporary Form D (17CER 239,500l) that is available to be filed instead of Form D CER 239,500) only to issuers that file with the Commission a notice on Temporary Form D (17 CER 239,500l) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239,500) but, if it does, the issuer must file amendments suing Form D (17 CFR 239,500) and otherwise comply with all the requirements of §230.5031

CN for Canada; FN for other foreign jurisdiction)

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. A copy not manually signed must be a photocopy of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (9-08) 22670504v2

# A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

• Each general and (	managing paraier or	partiership issuers.			
Check Box(es) that Apply:	O Promoter	Beneficial Owner	Executive Officer	☐ Director	■ General and/or Managing Partner
Full Name (Last name first, i P2 Capital GP II, LLC (the "C		<del></del>	<del>-</del>		
Business or Residence Addres	s (Number and Stre 590 Madison Aven	et, City, State, Zip Code) ue, 25th floor, New York, N	IY 10022		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	■ General and/or Managing Partner*
Full Name (Last name first, it Moller, Claus	f individual)				
Business or Residence Address c/o P2 Capital Partners, LLC,			Y 10022	-	
Check Box(es) that Apply:	■ Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it P2 Capital Partners, LLC	findividual)				
Business or Residence Addres 590 Madison Avenue, 25th flo					
Clieck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	findividual)				
Business or Residence Address	S (Number and Str	eet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	findividual)				
Business or Residence Address	s (Number and Str	cet, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)	_			
Business or Residence Addres	s (Number and Stro	eet, City, State, Zip Code)		_	
Check Box(es) that Apply:	Promoter	D Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	findividual)	-			
Business or Residence Address	S (Number and Stro	eet, City, State, Zip Code)			
* Managing member of the Go	eneral Partner				

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

		<u></u>				B. INFO	RMATIC	N ABOUT	OFFERE	NG	_			
		-								_				Yes No
ì	Has the	issuer sold,	or does the	issuer inte	nd to sell, t	o non-accre	dited inves	stors in this	offering?					🛭 🔳
Answer also in Appendix, Column 2, if filing under ULOE.														
2.	2. What is the minimum investment that will be accepted from any individual?\$10,000,000*													
	-		e sole discr											Yes No
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.														
Full N	Name (L	ast name f	irst, if indiv	idual)										
	pplicable													
Busin	ness or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	ode)							
						_	_			_				
Name	e of Asso	iciated Bro	ker or Deale	ег										
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														☐ All States
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	[AL] [IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[MO]	
	[IL] [MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
	[RI]	[SC]	[SD]	[TN]	[TX]	נייין [עד]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full N	Name (La	ast name fi	rst, if indivi	dual)										
Busin	ness or R	esidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)							_
Name	of Asso	ciated Bro	ker or Deale	er										
States	s in Whic	h Person L	isted Has S	Solicited or	Intends to S	Solicit Purc	hasers							
	(Check '	'All States'	or check in	ndividual S	tates)									☐ All States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
	(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
	[MT]	[NE]	[NV]	[NH]	[[1]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
	[RI]	[SC]	[SD]	[TN]	[XT]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full N	Vame (L	ast name fi	irst, if indiv	idual)						_				
Business or Residence Address (Number and Street, City, State, Zip Code)														
Name	of Asso	ciated Bro	ker or Deale	er										
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States)														
	`				•			(DC)	(DC)	(ret )		[131]	(ID)	C 1 II Diaics
	[AL]	[AK]	[AZ]	(AR)	[CA]	[CO]	(CT) [ME]	[DE] [MD]	[DC] [MA]	(FL) (Ml)	[GA] [MN]	[H1] [MS]	[ID] [MO]	
	(IL) (MT)	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[M3] [OR]	[PA]	
	[RI]	(SCI	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Sold Offering Price Debt ..... Equity ..... □ Common □ Preferred \$0 Convertible Securities (including warrants) \$35,000,000 \_\_\_\_ \$100,000,000\* Partnership Interests \_\_\_\_)..... \$0 Other (Specify \_ \$100,000,000\* \_\_\_\_ \$35,000,000 Total ..... Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number of Purchases Investors \$35,000,000 Accredited Investors \$0 \_\_\_\_ Non-accredited Investors Total (for filings under Rule 504 only)..... Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Sold Security Type of offering Rute 505..... Regulation A..... Rule 504 \$ Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs..... Legal Fees Accounting Fees Engineering Fees.

**■** \$\*\*

■ \$75,000\*\*

Sales Commissions (specify finders' tees separately)

Other Expenses (identify)

Total

<sup>\*</sup> This fund has no maximum aggregate offering amount of capital commitments; this number has been estimated for purposes of this Form D and includes amounts in any parallel funds or separate accounts the General Partner may establish to accommodate the investment considerations of other investors. / \*\* The Fund will pay or reimburse the General Partner and its affiliates for all legal and other organizational expenses incurred in the formation of the Fund and the offering of interests up to an amount not to exceed \$75,000. Organizational expenses in excess of this amount will be paid by the Fund but borne by the investment manager through a 100% offset against the management fee.

	C. OFFERING PRICE, NUMBER O	F INVESTORS, EXPENSES AND I	USE OF PROCEEDS					
b.	b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."							
5.	Indicate below the amount of the adjusted gross proceeds to the issuer amount for any purpose is not known, furnish an estimate and check must equal the adjusted gross proceeds to the issuer set forth in respon	the box to the left of the estimate. The						
			Payments to Officers, Directors, & Affiliates	Payments To Others				
	Salaries and fees		🗆 💲	□\$				
	Purchase of real estate		os					
	Purchase, rental or leasing and installation of machinery and equi	ipment	🗆 💲	□\$				
	Construction or leasing of plant buildings and facilities		as	<b></b>				
	Acquisition of other businesses (including the value of securities used in exchange for the assets or securities of another issuer purs	0\$	os					
	Repayment of indebtedness	🗆 💲	□\$					
	Working capital	🗆 🕏	□\$					
	Other (specify): Investments and related costs		- os	<b>\$99,925,000</b>				
			 	□\$				
	Column Totals		🗆 💲	<b>\$99,925,000</b>				
	Total Payments Listed (columns totals added)	■ \$9	<b>\$99,925.000</b>					
D. FEDERAL SIGNATURE  The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes								
an I	andertaking by the issuer to furnish to the U.S. Securities and Exchanges-accredited investor pursuant to paragraph (b)(2) of Rule 502.							
Issu	uer (Print or Type)	Signature	Date					
P2	Capital Fund II, L.P.	7.00	Dece	mber 23, 2008				
Nai	me of Signer (Print or Type)	Title of Signer (Print or Type)						
Cla	us Moller	Managing member of Pa Capital GP II, LLC, the general partner of P2 Capital Fund II, L.P.						

# **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

